DECLARATION FOR UTILITY

Approved for use through 09/30/2000 OMB 0651-0032 Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

NORTH-444A/A-2341

Raymond F Ayala

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB

Attorney Docket Number

First Named Inventor

OR DES			COMPLETE IF KNOWN									
(37 CFR		Application Number		09/892,596								
Declaration X_D	Declaration	Filing Date		06/27/01								
Submitted OR S with Initial F	Submitted after Initial Filing (surcharge	Group Art Unit										
Filing (3	37 CFR 1 16(e) required	Examiner Name										
As a below named inventor, I he	ereby declare that:											
My residence, post office address	·	s stated below next to my r	name									
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled												
METHOD FOR A KEY TO SELECTIVELY ALLOW ACCESS TO AN ENCLOSURE												
the specification of which is attached hereto OR was filed on (MM/DD/YYYY) 06/27/01 as United States Application Number or PCT International Application Number 09/892,596 and was amended on (MM/DD/YYYY) (if applicable) I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims as amended by any amendment specifically referred to above I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1 56 I hereby claim foreign priority benefits under 35 U S C 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing												
date before that of the application Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified YES	I Copy Attached NO							
☐ Additional foreign application r	numbers are listed on	a supplemental priority data	sheet PTO/SB/02B	attached hereto								
I hereby claim the benefit under 3	35 U S C. 119(e) of an	y United States provisional	application(s) listed	below.								
Application Number(s)	Filing	Date (MM/DD/YYYY)	Addition	al provisional applica	ation numbers are listed on							
60/096,251	08/12/98		a supple attached	mental priority data : hereto	sheet PTO/SB/02B							
		[Page 1 of 2]										

Please type Please type TRADE

Approved for use through 09/30/2000 OMB 0651-0032

Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE.
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number

DECLARATION — Utility or Design Patent Application									
I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application									
U.S. Parent Application or PCT Parent Patent Filing Date Parent Patent Number (MM/DD/YYYY) (if applicable)									
09/372,525					99				
☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02 attached hereto.									
As a named inventor, I have	ereby ap	point the following regi	stered prac	titioner(s	s) to prosecut	e this application	and to trans	act all business in the	
Patent and Trademark C	ffice con	nected therewith	X Cus			07663		Place Customer No.	
			X Reg	AND stered		name/registratio		ar Code Label Here sted below	
Name		Registration Nu	ımber		Nam	Э	Regi	stration Number	
Terry J Anderson Karl J Hoch, Jr Gerald L Lett		24,271 34,181 24,509			B Brunda ne Klein		28,497 43,718		
☐ Additional registered p	oractitione	er(s) named on supple	emental Reg	ıstered I	Practitioner In	formation sheet F	PTO/SB02C	attached hereto	
Direct all correspondence	e to X	Customer Number or Bar Code Label	007663			OR Corresp	ondence Ac	idress Below	
Name	A	ttention. Bruce B. Bru	nda						
Address									
Address									
City					State	4 · · · · · · · · · · · · · · · · · · ·	ZIP		
Country		Т	elephone				Fax		
I hereby declare that all s believed to be true, and punishable by fine or imp application or any patent	further the	at these statements w nt, or both, under 18 t	ere made w	ith the k	nowledge tha	t willful false state	ements and	the like so made are	
Name of Sole or First I	nventor:			☐ A pet	tition has bee	n filed for this uns	igned inven	tor	
Given Nan	ne (first a	nd middle [if any])				Family Name	or Surname		
Raymond F			- /	Ayala					
Inventor's Signature	·	Kalli	Je	\\ \(\)			Date 9/6/0/		
Residence City	San Die	ego	State	CA	Country	USA	Citizensh	p USA	
Post Office Address									
Post Office Address	11106	Pegasus Avenue				1			
City	San Di	ego	State	CA	ZIP	92126	Country	USA	
x Additional inventors are being named on the 2 supplemental Additional Inventor(s) sheet(s) PTO/SB02A attached hereto									

OIPE	
SEP 2 5 2001 3	
Please type a plus sign (Syside this box ->	PTO/SB/02A (3-97) Approved for use through 9/30/98 OMB 0651-0032
	Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE in are required to respond to a collection of information unless it contains a

DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page _1_ of Z_3

				ــــــــــــــــــــــــــــــــــــــ						
Name of Addition	A petition has been filed for this unsigned inventor									
Given Name (first and middle [if any])					Family Name or Surname					
Phili	р Ј.				Fi	nlay				
Inventor's Signature	Phily	o J	Lu	la	lay 9/6/01					
Residence: City	Chula Vista	State	CA		Country	U.S.A.	Citizens	ship	u.s.	
Post Office Address										
Post Office Address	1711 Harvar	d Str	eet							
City	Chula Vista	State	CA		ZIP	91913	Country	U.	S.A	•
Name of Addition	nal Joint Inventor, if a	ny:			A petitio	n has been file	ed for this	unsigi	ned inv	entor
Given Nai	me (first and middle (if any	/l)			Family Name or Sumame					
Steve	even Shannon									
inventor's Signature	Steven	52	zunn	·~				9/06/2017 Date		
Residence: City	San Diego	State	State CA		Country	U.S.A.		Citizenship		U.S.
Post Office Address										
Post Office Address	2353 Albat	ross	Stre	et,	Apt	. 303				
City	San Diego	State	CA		ZIP	92101	Count	γ	U.S.A.	
Name of Addition	nal Joint Inventor, if a	ny:			A petitio	n has been file	d for this	unsign	ned inv	entor
Given Nar	ne (first and middle [if any	·])				Family Na	me or Su	ımame		
Matthe	ew D.				St	eindl				
Inventor's Signature						Date				
Residence: City	Raleigh	State	NC		Country U.S.A.			Citizenship U.S.		
Post Office Address										
Post Office Address	9516 Berryv	ille	Cour	t						
City	Raleigh	State	NC		ZIP	27617 Cou		untry	intry U.S.A.	

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

OIPE	
SEP 2 5 2001 (2)	
Please type Thus sign (-), gains this box ->	PTO/S8/02A (3-97) Approved for use through 9/30/98. OMB 0651-0032
RADEM	Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE no persons are required to respond to a collection of information unless it contains a

valid OMB control number

DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page D of 2 3

Name of Additional Joint Inventor, if any:										
Given N	ame (first and middle (if ar		Family Name or Surname							
Philip J.					Fi	nlay				
Inventor's Signature						Date				
Residence: City	Chula Vista	la Vista State CA			Country	U.S.A.		Citizenship	Ū.S.	
Post Office Address	Post Office Address									
Post Office Address	1711 Harvard Street									
City	Chula Vista	State	CA		ZIP	91913	Countr	country U.S.A.		
Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor										
Given Na	ame (first and middle (if an	yli		\Box	Family Name or Sumame					
Steve	n				Shannon					
inventor's Signature								Date		
Residence: City	San Diego	State	CA		Country	U.S.A.		Citizenship	U.S.	
Post Office Address										
Post Office Address	2353 Albat	ross	Stre	et,	Apt	. 303				
City	San Diego	State	CA		ZIP	92101	Coun	try U.	s.A.	
Name of Addition	nal Joint Inventor, if a	ny:			A petition	n has been file	d for th	is unsigned in	ventor	
Given Na	me (first and middle (if any	/])				Family Nan	ne or S	urname		
Matthe	ew D.			Steindl						
inventor's Signature	Jame J.					Date 2/17/01				
Residence: City	Raleigh State NC Country U.S.A. Citizensi						Citizenship	u.s.		
Post Office Address										
Post Office Address	9516 Berryv	ille	Court	-	,					
City	Raleigh	State	NC		ZIP	27617	Co	ountry U.	s.A.	

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

PTO/SB/02A (3-97)

Approved for use through 9/30/98. OMB 0651-0032

Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Valid OMB cooled cumber. valid OMB control number

DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page 23 of 23

Name of Additi	onal Joint Inventor, i	f any:				A peti	tion has been fi	led for t	hıs unsig	ned i	nventor			
Given N	Given Name (first and middle [if any])							Family Name or Surname						
Wood	row C.						Stillwage	on						
Inventor's Signature	Wor	(C Hatiran 9/10/01											
Residence: City	Atlanta		State	G?	1	Country	U.S.A.	1	Citizens		U.S.			
Post Office Address														
Post Office Address 7610 Ball Mill Road														
City	Atlanta	s	itate	GA		ZiP	30350	Countr	y U	.s.	Α.			
Name of Additio	nal Joint Inventor, if	any:] A petiti	on has been file	ed for th	ıs unsign	ed in	ventor			
Given Na	ame (first and middle (if a	ny])					Family Na	me or S	Sumame					
Inventor's Signature									Dat	e				
Residence: City		St	ate			Country			Citizen					
Post Office Address														
Post Office Address														
City		S	tate			ZIP		Count	try		·			
Name of Addition	nal Joint Inventor, if a	iny:				A petitio	n has been filed	d for this	s unsigne	ed inv	entor			
Given Nar	ne (first and middle (if an	y])					Family Nan	ne or St	umame					
Inventor's Signature									Date					
Residence: City		Sta	te			Country			Citizens	hip				
Post Office Address														
Post Office Address														
City		State				ZIP		Cou	ıntry					

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.